

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

PLAINTIFF	CASSIUS M. CLAY SR.,	COURT CASE NUMBER	05-125E
DEFENDANT	TRACEY REEVES, et al.,	TYPE OF PROCESS	Civil Action 1983

SERVE { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
 AT { SHARON M. BURKE S GRIEVANCE COORDINATOR
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 2520 LISBURN Rd., P.O. BOX 598, Camp Hill PA 17001-0598

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285
<input checked="" type="checkbox"/> CASSIUS M. CLAY SR., INMATE #DQ5954 P.O. BOX 945 <input type="checkbox"/> Marienville, PA 16239	3
	Number of parties to be served in this case
	Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

CAN REACH BETWEEN 8:00a.m. - 2:30p.m.
WORKS FOR THE DEPARTMENT OF CORRECTIONS
IN Camp Hill PA.

Fold

Signature of Attorney other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
<i>Cassius M. Clay Jr.</i>	<input type="checkbox"/> DEFENDANT	(814) 621-2110	1/9/06

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY—DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk	Date
	_____	No. _____	No. _____		

I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
<i>Stacy Tarvis Clerical Supervisor</i>	

Address (complete, only different than shown above)

Date	Time
1/27/06	1:30
<input type="checkbox"/> am	
<input checked="" type="checkbox"/> pm	
Signature of U.S. Marshal or Deputy	
<i>Wayne E. Johnson</i>	

Service Fee	Total Mileage Charges including envelopes 12 @ 44 ⁸ * 5.34	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) <i>\$1151 34</i>
B 45.00	8.00	58.34			

REMARKS: TO SCFTN TO 1-13-06

1 - DUSM: 1:00 p.m. - 2:00 p.m.

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

*IN THE UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA*

Cassius M. Clay Sr.) Civil Action: 05-0125 Erie
vs.)
Sharon M. Burkes)

NOTICE OF INABILITY OF EFFECTUATE SERVICE

The Under signed Hereby certified that on 09/21/05, the Order and Complaint in the above captioned case, and the Notice of Lawsuit and Request for Waiver of Service of Summons and Waiver of Service of Summons were mailed to the above named defendant. No acknowledgment of service has been received, and more than 30 days has elapsed.

*Thomas M. Fitzgerald
United States Marshal
Western District of Pennsylvania*

By: Sheila Blessing
Administrative Clerk
United States Marshals Service
Western District of Pennsylvania
December 7, 2005

ORDER

AND NOW, this _____ day of _____, 20____, upon consideration of the
foregoing Notice of Inability to Effectuate Service,

IT IS ORDERED that the Clerk of Court prepare duplicate Summons and Complaint,

AND IT IS FURTHER ORDERED that the United States Marshal make personal service of those documents upon the above named defendant.

s/Susan Paradise
Baxter

Digitally signed by s/Susan Paradise Baxter
DN: CN = s/Susan Paradise Baxter, C =
US
Date: 2005.12.08 14:58:20 -05'00'